

381 Oral Health Conditions

Area:	Summary of Revision Updates: (Implemented Oct. 1, 2014)																				
Title:	Changed from <i>Dental Problems</i> to Oral Health Conditions .																				
Definition:	<p>Cavities/tooth decay: caused by mouth bacteria interacting with sugars producing acid that breaks down teeth.</p> <p>Periodontal diseases (gingivitis, periodontitis): infections of the gum tissues and bone that support teeth.</p> <ul style="list-style-type: none"> • Tooth loss, poorly replaced teeth and/or the above conditions may interfere with the ability to eat. 																				
Justification:	<p>Infants and Children - Tooth decay is common and preventable.</p> <ul style="list-style-type: none"> • With poor oral health, cavities may develop as soon as teeth come through the gums. • Cleaning a baby’s teeth after nursing or having a bottle can decrease risk. • The more bacteria formed at a young age, the greater the decay risk. A mother’s bacteria may be passed to her child when sharing cups/silverware. Second hand smoke exposure may increase bacteria. • Frequent sugar exposure leads to tooth decay: <ul style="list-style-type: none"> ○ sweetened liquids or juice (e.g., propped bottles, walking around with a bottle, ‘sippy’ cups) ○ frequent snacks containing sugar • Added sugars in food/beverages increases risk more than naturally occurring sugars. High risk foods: <table style="width: 100%; border: none;"> <tr> <td>breakfast bars</td> <td>cookies</td> <td>fruit juice</td> <td>soda crackers</td> </tr> <tr> <td>cake</td> <td>dried fruit</td> <td>granola bars</td> <td>sweetened beverages</td> </tr> <tr> <td>candies</td> <td>doughnuts</td> <td>pretzels</td> <td>sweetened dry cereals</td> </tr> </table> <p>Women - Tooth decay or periodontal disease in a pregnant or postpartum woman may increase –</p> <ul style="list-style-type: none"> ○ a woman’s health risk (atherosclerosis, rheumatoid arthritis, diabetes) ○ pregnancy risk (preeclampsia, preterm birth, low birth weight) ○ the baby’s risk (tooth decay) • Barriers to dental care and healthy foods/beverages are the: <ul style="list-style-type: none"> ○ Inability to afford the cost ○ lack of access (e.g, distant location, lack of transportation) ○ lack of understanding about caring for teeth/gums <p>Fluoride - Is a safe way to help prevent and control cavities (by water source, varnish and/or supplement)</p> <ul style="list-style-type: none"> • Go to CDC’s <i>My Water’s Fluoride</i> website: http://apps.nccd.cdc.gov/MWF/Index.asp to find out if a community’s water is fluoridated. • Infant formula contains low levels of fluoride. Refer questions about whether to use fluoridated water when preparing formula to the baby’s health care provider. • Excessive fluoride intake may cause fluorosis (lacy white spots on the tooth). Severe fluorosis is rare. <p>Anxiety - Fear of dental procedures/pain can be a barrier to getting dental care.</p> <ul style="list-style-type: none"> • Dental providers have developed techniques to help relieve patient’s anxiety/fear. <p>Special Health Care Needs – The following conditions increase the risk for developing oral health problems:</p> <table style="width: 100%; border: none;"> <tr> <td>prematurity</td> <td>craniofacial malformations (cleft lip/palate)</td> </tr> <tr> <td>intrauterine malnutrition</td> <td>compromised immune function (certain medications, AIDS)</td> </tr> <tr> <td>gastro-esophageal reflux disease (GERD)</td> <td>Down syndrome</td> </tr> <tr> <td>failure to thrive/growth problems</td> <td>delayed tooth eruption (DTE)</td> </tr> </table> <p>General Health - Most tooth extractions are due to cavities and periodontal disease, not normal aging.</p> <ul style="list-style-type: none"> • Diet quality tends to decline with tooth loss (nutrient intake decreases). 	breakfast bars	cookies	fruit juice	soda crackers	cake	dried fruit	granola bars	sweetened beverages	candies	doughnuts	pretzels	sweetened dry cereals	prematurity	craniofacial malformations (cleft lip/palate)	intrauterine malnutrition	compromised immune function (certain medications, AIDS)	gastro-esophageal reflux disease (GERD)	Down syndrome	failure to thrive/growth problems	delayed tooth eruption (DTE)
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	<p>WIC Recommendations – see the websites listed in risk 381’s text for education resources/handouts.</p> <p>Diet:</p> <ul style="list-style-type: none"> ➤ Breastfeed during the first year of life and beyond as mutually desired. ➤ Avoid having a baby/child sleeping with a bottle (or else use plain water). ➤ Wean from bottles by age 12 months. ➤ Drink/provide only water and milk between meals. ➤ Limit sugary foods and drinks (if eaten do so at mealtime). ➤ Limit 100% fruit juice to ½ to ¾ cup per day; avoid juice drinks and carbonated beverages. ➤ Eat/provide a varied, balanced healthy diet. <p>Oral Hygiene, Fluoride, Referrals:</p> <ul style="list-style-type: none"> ➤ Wipe a baby’s gums with a washcloth or soft toothbrush to establish a daily routine. ➤ Brush teeth twice daily (morning/evening) starting when a baby’s teeth erupt. ➤ Use fluoride toothpaste (‘pea-size’ for 2-5 year olds, ‘smear’ for under age 2). ➤ Floss daily; minimize saliva sharing activities (e.g. sharing a cup, silverware). ➤ Women rinse nightly with alcohol-free over-the-counter mouth rinse (0.05% sodium fluoride). ➤ Parents/caregivers discuss fluoride supplementation with their child’s dentist. ➤ Find a dentist/dental home by 12 months of age: WIC staff can provide referrals as needed. ➤ Have dental exams/care every 6 months.
Clarification:	381 requires a diagnosis or self-report of diagnosis by a physician, dentist or someone working under a physician.